CANDIDATE / OFFICEHOLDER

FORM C/OH

| CAMPAIG | N FINANCE REPORT | /167 | COVER SHEET PG 1 |
|---|---|--|---|
| The C/OH instruction (| Guide explains how to complete this form. | 1 ACCOUNT# (Ethics Commission filers) | 2 Total pages filed: |
| 3 CANDIDATE/ OFFICEHOLDER NAME | MS/MRS(MR) RDMA(JFIRST | M _I | OFFICE USE ONLY |
| · · · · · · · · · · · · · · · · · · · | Ronnie Earle | SUFFIX | Date Received |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS | P. O. BOX 2092 | CITY; STATE; ZIP CODE | Date Hand-delivered or, Date Postmarked |
| Change of Address | Mustin, lexas | | 145.01 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 |
| 5 CANDIDATE/ OFFICEHOLDER PHONE | AREA CODE SHONE NUMBER (5/2) 263-5235 | EXTENSION S | Receipt # Amount |
| 6 CAMPAIGN TREASURER NAME | MS / MRS (MR) FIRST | D. SUFFIX | Date Imaged |
| ^ | Konnie Earle | <u>e</u> | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE): APT/SUIT | | Stin, Tx. 78738 |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER (512) 263-52. | 3.5 | |
| 9 REPORT TYPE | January 15 30th day before election | n Runoff | 15th day after campaign treasurer appointment (officeholder only) |
| | July 15 Bth day before election | · · · · · · · · · · · · · · · · · · · | Final report (Attach C/OH - FR) |
| 10 PERIOD COVERED | Month Day Year THROL | UGH 6/30 | |
| 11 ELECTION | ELECTION DATE ELECTION TYPE | Æ | |
| | / Primary | Runoff | General Special |
| 12 OFFICE | OFFICE HELD (If any) | 13 OFFICE SOUGHT (If know | vn) |
| 14 NOTICE OF DIRECT CAMPAIGN | Direct campaign expenditures are campaign ex Candidates are required to disclose this information. | | |
| EXPENDITURE BY OTHER INDIVIDUALS | Name | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> |
| ` | Address / PO Box; Apt. / Suite #; City; State; Zi | čip Code | |
| additional pages | | | |
| , | GO TO P | AGE 2 | |

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

| SUFFURI | & IOIAL | .5 | COVER SHEET PG 2 | |
|--|--|--|---|--|
| 15 C/OH NAME | | | 16 ACCOUNT # (Ethics Commission Filers) | |
| 17 NOTICE FROM POLITICAL COMMITTEE(S) | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures | | | |
| | COMMITTEE TYPE | COMMITTEE NAME | | |
| ; ; | GENERAL | COMMITTEE ADDRESS | | |
| | SPECIFIC | | | |
| , additional pages | | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |
| | | | | |
| 18 CONTRIBUTION TOTALS | | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ -0- | |
| ı | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ | | | |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ 89.53 | | | |
| | 4. TOTAL | POLITICAL EXPENDITURES | \$ 784.17 | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$31,432.50 | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ | | | |
| 19 AFFIDAVIT | | | | |
| Z N | HARRY R. CACCAMI otary Public, State of 1 My Commission Exp August 22, 2010 | res me under Title 15, Election Code. | | |
| Signature of Candidate or Officeholder | | | | |
| Sworn to and subscribed before me, by the said Rohald Earle, this the 15th day | | | | |
| of July 2009, to certify which, witness my hand and seal of office. | | | | |
| Signature of officer administering cath Printed name of officer administering cath Title of officer administering cath | | | | |
| | ₹' | • | 1 | |

| POLITICAL EXPENDITURES SCHEDULE F | | | | | |
|--|--|--|--|--|--|
| The instruction Guide explains how to complete this form. | 1 Total pages Schedule F: | | | | |
| 2 FILER NAME ROHALD D. Ear | 3 ACCOUNT # (Ethics Commission filers) | | | | |
| 4 Date 5 Payee name See attac 6 Payee address; City; State; Zip Code | ched 7 Amount (\$) | | | | |
| 8 Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T) | 9 Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | | | | |
| Dale Payee name | : Amount (\$) | | | | |
| Payee address; City; State; Zip Code | | | | | |
| Purpose of payment (See instructions regarding type of information required.) | | | | | |
| Oate Payee name Payee address; Clty; State; Zlp Code | Amount (\$) | | | | |
| Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T) | •• Complete if direct expenditure to benefit C/OH •• Candidate / Officeholder name Office sought Office held | | | | |
| Date Payee name | Amount (\$) | | | | |
| Payee address; City; State; Zip Code | ^ | | | | |
| Purpose of payment (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T) | Complete if direct expenditure to benefit C/OH → Candidate / Officeholder name Office sough! Office held | | | | |
| ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED | | | | | |

Schedule F: Expenses over \$50 7. 1/02/09 Casa Verde Florist 1806W Koenig Austin TX 78756 \$64.95 flowers 1/21/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$31.50 bank fees 2/13/09 Book People 603 N.Lamar Austin TX 78703 \$15.89 publications 2/20/09 Book People 603 N Lamar Austin TX 78703 \$25.98 publications 2/19/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$31.50 bank fees 2/28/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$29.00 bank fees 3/18/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$31.50bank fees 3/24/09 TexansTogether Ed. Fund \$250.00 donation 3/26/09 Book People 603 N.Lamar Austin TX 78703 \$44.27 publications 4/17/09 Wells Fargo Bank. PO Box 2019 Austin TX 78768 \$31.50 bank fees 4/1/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$29.00 bank fees 5/30/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$29.00 bank fees 6/17/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$41.50bank fees 6/30/09 Wells Fargo Bank PO Box 2019 Austin TX 78768 \$39.00 bank fees